THADE Application Number 09/125,114 FOR Filing Date August 18, 1998 **CONTINUED EXAMINATION (RCE)** First Named Inventor Ian Ashley Price **TRANSMITTAL** Group Art Unit 1617 Address to: Mail Stop RCE Examiner Name Shaojia A. Jiang **Commissioner for Patents** P.O. Box 1450 2955-101 Attorney Docket Number Alexandria, VA 22313-1450 This is a Request for Continued Examination (RCE) under 37 C.F.R. § 1.114 of the aboveidentified application. Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.

1.	amendments enclosed with the RCE will be entered in the order in which they were filed unless applicant instructs otherwise If applicant does not wish to have any previously filed unentered amendment(s) entered, applicant must request non-entry such amendment(s).										unless applicant instructs otherwise.
a. Previously submitted											
i. Consider the amendment(s)/reply under 37 C.F.R. § 1.116 prev									previously filed on		
ii. Consider the arguments in the Appeal Brief or Reply Brief.								ply Brief p	Brief previously filed on		
b. Enclosed											
i. X Amendment/Reply											
	ii. Affidavit(s)/Declarations										
iii. Information Disclosure Statement (IDS) iv. Other											
2.	Mis	Miscellaneous									
a. Suspension of action on the above-identified application is requested under 37 C.F									ested under 37 C.F.R. §		
	1.103(c) for a period of months. (Period of suspension shall not exceed 3 month										
under 37 C.F.R. § 1.170(i) required.)								,			
b. Other											
3.										1 114 when the RCF is filed.	
	 a. [X] The Director is hereby authorized to charge the following fees, or credit any overpayments Deposit Account No. 02-2135. 									or click any overpayments, to	
	- · · · · · · · · · · · · · · · · · · ·										
	ii. Extension of time fee (37 C.F.R. §§ 1.136 and 1.17) iii. X Other Claim fees \$1750										
	b. X Check in the amount of \$790.00 enclosed.										
	c. Payment by credit card (Form PTO-2038 enclosed.)										
SIGNATURE OF APPLICANT, ATTORNEY OR AGENT REQUIRED											
•	NAME AND REG. NUMBER			Will	Willem F. DeWeerd, Reg. No. 51,613						
s	SIGNATURE									DATE	April 27, 2005

04/28/2005 JADDO1

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